

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	A. H.	7242	10/5/00
O.I.P.E. CLASSIFIER		48	10/10/00
FORMALITY REVIEW	C. Y. C.	IC 530	10-06-00
RESPONSE FORMALITY REVIEW	MB	903	12-30-00

INDEX OF CLAIMS

BEST AVAILABLE COPY

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final	Original
1	9/2/00
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
10	✓
11	✓
12	✓
13	✓
14	✓
15	✓
16	✓
17	✓
18	✓
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21	✓
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23	✓
24	✓
25	✓
26	✓
27	✓
28	✓
29	✓
30	✓
31	✓
32	✓
33	✓
34	0
35	0
36	0
37	0
38	✓
39	0
40	0
41	0
42	✓
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Claim	Date
Final	Original
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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